Why is the elimination of hepatitis C in prisons important?

The World Health Organization (WHO) 2030 global elimination targets for hepatitis C virus are:

80%	90%	65%
of those with chronic HCV treated	reduction in the incidence (or transmission) of HCV	reduction in liver-related deaths

Hepatitis C disproportionately affects people in prison given the over-incarceration of people who inject drugs. Prisons are also high-risk environments for hepatitis C transmission given the presence of risky behaviours including the sharing of unsterile injection and tattooing equipment. The WHO identifies people in prison and prison settings as key populations and settings for addressing viral hepatitis, respectively .

To meet the WHO elimination goals, countries must include a focus on their prison population. Most people in prison return to the community within a short time, so the absence of hepatitis C care in prison can have a tremendous impact on the wider community. There are also numerous individual-level benefits to being cured of hepatitis C, including improved quality of life. Treatment cures the infection, decreases inflammation in the liver and reduces the long-term risk of health problems including chronic liver disease and liver cancer. Prisons provide an opportunity to screen and treat large numbers of people for hepatitis C who may not access mainstream health services in the community. Evidence of the effectiveness, acceptability, and cost-effectiveness of prison-based hepatitis C testing and treatment programs is well established.

Why address hepatitis C in prisons?

The prison setting is crucial for hepatitis C elimination efforts, due to the disproportionately high prevalence of the disease among people in prison. The transient nature of individuals moving between the prison system and the community presents unique challenges and opportunities.

Addressing hepatitis C in prisons not only improves the health of people in prison but also contributes significantly to community health upon their release, helping to break the cycle of transmission and reducing the overall burden of the disease.

While in prison, people have consistent accommodation, a structured daily routine, and access to healthcare - all of which may be competing priorities when in the community. Prisons are also considered a less stigmatising setting for hepatitis C care than community-based health services.

Experiences of homelessness or housing instability, physical and mental health conditions, stigma and discrimination, and financial situations often compromise a person's ability to access healthcare services for testing, or start or complete hepatitis C treatment in the community. Prison-based healthcare teams can assist individuals to access testing and treatment, and complete the 8- to 12-week treatment course for hepatitis C.

Necessary to achieve HCV elimination

Prison stays can provide a key opportunity to reach people with hepatitis C. One study from the United States demonstrated that the scale up of jail-based hepatitis C treatment was an important strategy to offset declines in treatment initiations observed in the community. From 2015-2019, treatments started in New York City (NYC) jails increased annually, whereas Medicaid-funded prescriptions in the NYC community declined since their peak in 2015 (Chan, J et al. 2024).

> *Given the importance of prison-based HCV testing and treatment for national and global elimination efforts, the lack of prison-specific impact and coverage targets in the WHO guidance is a significant gap in public health policy.*
> *- Jurgen K. Rockstroh et al. J Int AIDS Soc. 2023*

When all people in prison with hepatitis C infection are treated for hepatitis C, there is an overall reduction in the number of new hepatitis C infections, resulting in a treatment as prevention effect. By providing this high-prevalence population with accessible testing, treatment, and prevention, governments have an opportunity to make a significant impact on the numbers of people with hepatitis C. Without efforts to treat hepatitis C in prison populations, most countries will not achieve the WHO goal of eliminating hepatitis C as a public health threat by 2030.

This project was funded by a grant from Gilead Sciences. Gilead Sciences had no input into the content, tone, emphasis or selection of the models profiled.